

Signature

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

09 APR -6 AM 8: 20

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDA O

The assumed business name which the undersigned business is: Scents For Schools	ed use(s) in the transaction of
2. The true name(s) and business address(es) of the elements business under the assumed business name: Name AK Publications, INC. 3011 (C142325)	Complete Address
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
3011 N. 35-75 St BOIX, ID 83703	(208) 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only

.

IDAHO SECRETARY OF STATE
44/06/2009 05:00
CK: 1955 CT: 214954 RH: 1164463
1 # 25.00 = 25.00 ASSUM NAME # ;

D129636